

**REGION 11 CORPORATE EXECUTIVE INFORMATION SYSTEM (CEIS)  
CEIS DATA IMPROVEMENT PLAN (DIP)  
DATA COMPLETENESS REPORT**



for  
TRICARE Northwest Lead Agency, Region 11  
Madigan Army Medical Center  
Ft Lewis, Washington

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## REGION 11 CEIS DATA IMPROVEMENT PLAN (DIP) DATA COMPLETENESS REPORT

### INTRODUCTION

The Region CEIS 11 Integrated Contractor Team (ICT) performed an in-depth review of the July 1999 Data Analysis Spreadsheet produced by the CEIS Program Office. This was part of a CEIS program effort to validate the completeness of the data in CEIS. The goal was to identify ways to retrieve the data where shortages exist between the Source Systems and CEIS. This report attempts to detail areas where we feel there is a possibility of retrieving missing data records. The Data Analysis Spreadsheet used for this review performs the following comparisons (from CEIS Web Site [http://www.ceis.ha.osd.mil/org/da/DAS\\_Details.htm](http://www.ceis.ha.osd.mil/org/da/DAS_Details.htm)):

When a user views the spreadsheet, the focus should be on the color-coded area, which contains these comparisons. The percent difference metrics is indicative of the percentage of missing data in CEIS as displayed by data type. These metrics are:

**PERCENTAGE DIFFERENCE CHCS DISP TO IDB IP:** The number of inpatient disposition records in CHCS compared to the number of inpatient dispositions received/processed by CEIS. Considerations are made for the difference in definition of 'dispositions.' (Source document is the PAD 460 report from CHCS or GT MUMPS Adhoc (NMC San Diego only)).

**PERCENTAGE DIFFERENCE MEQS TO IDB IP:** The number of inpatient dispositions in MEQS compared to CEIS.

**PERCENTAGE DIFFERENCE IDB TO HBOC IP:** The internal comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the standard inpatient data record is complete within CEIS.

**PERCENTAGE DIFFERENCE IDB SDS TO HBOC SDS:** The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the same day surgeries is complete within CEIS.

**PERCENTAGE DIFFERENCE ADS TO IDB OP:** The number of standard ambulatory data records in the ADS server compared to the number of standard ambulatory records received/processed by CEIS.

**PERCENTAGE DIFFERENCE ADS TO FTDTRK OP:** The number of standard ambulatory data records in the ADS servers compared to Ft. Detrick, MD.

**PERCENTAGE DIFFERENCE IDB TO HBOC OP:** The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the standard ambulatory data record is complete within CEIS.

**PERCENTAGE DIFFERENCE IDB TO HBOC IP Ancil:** The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the inpatient ancillary data is complete within CEIS.

**PERCENTAGE DIFFERENCE IDB TO HBOC OP Ancil:** The comparison between the two CEIS servers (Data Warehouse and Data Mart) to ensure that the processing of the outpatient ancillary data is complete within CEIS. When the indicator is red (missing data), the integrated contract team goes to the source systems (CHCS & ADS) and retrieves historical data. A yellow indicator represents a negative number, which usually is the result of pulling the source document at the wrong time. Green indicators are the desired results of the analysis. However, we are not looking for perfect data.

## COLLECTED DATA

### Madigan Army Medical Center (DMIS 0125)

#### Data Comparison Findings:

The information in Table 1 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified three items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. These items are the outpatient shortages of Nov 96, Mar 97, and Aug 97.

**Table 1**

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0125	MADIGAN AMC	SIDR	Oct 96	MEQ to IDB	CEIS has known shortages of inpatient records in Oct 96 and Nov 96. These were identified on past DAS reports but are unretrievable due to the archiving of SIDRs on CHCS after 18 months. Attempts to retrieve from Ft Detrick were unsuccessful. These records remain unretrievable.
		SADR	Nov 96	ADS to IDB	CEIS currently has 93% of the records for this month. Ft Detrick reports having 99.9% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved from the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Mar 97	ADS to IDB	CEIS currently has 89% of the records for this month. Ft Detrick reports having 97% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved from the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Aug 97	ADS to IDB	CEIS currently has 67.8% of the records for this month. Ft Detrick reports having 99.9% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved from the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Oct 97	ADS to FTDTK	CEIS has the 99.8% of the ADS outpatient records. This is a Ft Detrick issue.
			May 98 - Jun 98	ADS to FTDTK	CEIS has the 99.9% of the ADS outpatient records for both months. This is a Ft Detrick issue.
			Dec 98 - Feb 99	ADS to IDB; ADS to FTDTK - ADS is lower	The local ADS system at MAMC had a catastrophic failure causing loss of most of the outpatient records for this period. Because of this unrecoverable loss of records reports from ADS that are used for comparison with CEIS under-reports the actual visits for these months.

### Bremerton Naval Hospital (DMIS 0126)

#### Data Comparison Findings:

The information in Table 2 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified three items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. These items are the outpatient shortages of Oct 96, Nov 96, and Jan 99.

**Table 2**

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0126	NH BREMERTON	SIDR	No Issues		No Action required.
		SADR	Oct 96 - Nov 96	ADS to IDB	CEIS currently has 43% and 71% respectively the records for this month. Ft Detrick reports having 100% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Jan 99	ADS to IDB	CEIS currently has 94% of the records for this month. Ft Detrick reports having 98% of the ADS records for this month. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Suggest looking for received but not loaded SADR files on the IDB and if this does not locate the missing, suggest attempt retrieving records from Ft Detrick.

### Oak Harbor Naval Hospital (DMIS 0127)

#### Data Comparison Findings:

The information in Table 3 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified two items that warrant further investigation because of the likelihood we may be able to retrieve the missing records. These item are the outpatient shortages of Oct 96 and Nov 96.

**Table 3**

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0127	NH OAK HARBOR	SIDR	No Issues		No Action Required
		SADR	Oct 96 - Nov 96	ADS to IDB	CEIS currently has 31% and 94.9% respectively the records for this month. Ft Detrick reports having nearly 100% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick.
			Feb 99	IDB SDS to HBOC SDS	When the July DAS was created the HBOC server did not have the entire outpatient and SDS visits available on the IDB loaded in the HBOC database. Since this time we have loaded additional data and now have 100% of the IDB records and nearly 100% of the ADS records for this month.
			Mar 99	IDB to HBOC IP; IDB SDS to HBOC SDS	When the July DAS was created the HBOC server did not have the entire outpatient and SDS visits available on the IDB loaded in the HBOC database. Since this time we have loaded additional data and now have 100% of the IDB records and nearly 100% of the ADS records for this month.

**92<sup>nd</sup> Medical Group, Fairchild AFB (DMIS 0128)**

**Data Comparison Findings:**

The information in Table 4 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, there are no items that warrant further investigation. All discrepancies are explained in the table below.

**Table 4**

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0128	92nd MEDICAL GROUP	SIDR	FY97	CHCS to IDB - IDB data is lower	CEIS has known shortages of inpatient records in FY97. These were identified on past DAS reports but are unretrievable due to the archiving of SIDRs on CHCS after 18 months. Attempts to retrieve from Ft Detrick were unsuccessful. These records remain unretrievable.
			Oct 97 - Dec 97	CHCS to IDB	CEIS has known shortages of inpatient records in Oct 97 and Nov 97. These were identified on past DAS reports but are unretrievable due to the archiving of SIDRs on CHCS after 18 months. Attempts to retrieve from Ft Detrick were unsuccessful. These records remain unretrievable.
			Jun 98	CHCS to IDB	This item is incorrect on the DAS. CEIS has 12 of the 13 records from this month, which is well within the allowable shortfall percentage of a small facility. DAS should have this item coded as "green".
		SADR	Jan 97	ADS to IDB; ADS to FTDTK	The local ADS system at Fairchild had a catastrophic failure causing loss of most of the outpatient records for all months prior to Dec 98. Because of this unrecoverable loss of records reports from ADS that are used for comparison with CEIS under-reports the actual visits for these months.
			Aug 97	ADS to IDB; ADS to FTDTK	The local ADS system at Fairchild had a catastrophic failure causing loss of most of the outpatient records for all months prior to Dec 98. Because of this unrecoverable loss of records reports from ADS that are used for comparison with CEIS under-reports the actual visits for these months.
			Oct 97	ADS to IDB; ADS to FTDTK	The local ADS system at Fairchild had a catastrophic failure causing loss of most of the outpatient records for all months prior to Dec 98. Because of this unrecoverable loss of records reports from ADS that are used for comparison with CEIS under-reports the actual visits for these months.
			Jun 98	IDB SDS to HBOC SDS	This item is incorrect on the DAS. The HBOC has all the SDS records that are loaded in the IDB. DAS should have this item coded as "green".
			Jun 98 - Jul 98	ADS to FTDTK; IDB to HBOC OP	This item is incorrect on the DAS. The HBOC has all the SDS records that are loaded in the IDB. DAS should have this item coded as "green".



## 62<sup>nd</sup> Medical Group (DMIS 0395)

### Data Comparison Findings:

The information in Table 5 below contains an item by item analysis of the areas of the Jul 1999 DAS identified as a discrepancy (red). Of the areas identified in the below table, we identified one item that warrants further investigation because of the likelihood we may be able to retrieve the missing records. These item are the outpatient shortages of Oct 98.

**Table 5**

DMIS ID	Facility	Data Type	Issue Month	Comments	Regional CEIS ICT Comments/ Action Plan
0395	62nd MEDICAL GROUP	SIDR	N/A		No Action Required
		SADR	Oct 96	ADS to IDB; ADS to FTDTK	CEIS currently has 68% the records for this month. Ft Detrick reports having nearly 3% of the ADS records for this month. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Since Ft Detrick also does not have these records they are unretrievable.
			Dec 96	ADS to IDB; ADS to FTDTK	CEIS currently has 44% the records for this month. Ft Detrick reports having nearly 44% of the ADS records for this month. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Since Ft Detrick also does not have these records they are unretrievable.
			Oct 98	ADS to IDB	CEIS currently has 94.8%. Ft Detrick reports having nearly 100% of the ADS records for this month. Past attempts to retrieve the missing records from Ft Detrick have been unsuccessful. The records cannot be retrieved form the source system (ADS), since this is outside the 3-month retrieval window. Therefore, we suggest making another attempt at retrieval from Ft Detrick

## **CONCLUSION**

### **Summary of Findings**

The analysis of the discrepancies of the July 1999 DAS revealed there is presently no mechanism to retrieve any of the inpatient record shortages in CEIS and 9 months where there is a possibility of retrieving outpatient records where CEIS is short.

While there is a possibility of retrieving these records several issues exist which may impact our ability to obtain completeness level of 95% or greater.

1. The local ADS systems have the ability to generate a Local SADR Extract for the months we are short, but this type of extract pulls the patient's current enrollment status versus providing the patients enrollment status at the time of the visit. Because of this enrollment status issue, the CEIS Program Management Office has mandated that no ADS Local Extracts be performed after 3 months time has passed. All of the present outpatient record shortages are older than 3 months leaving this option out.
2. An alternative method is to obtain the records from Ft Detrick to fill CEIS outpatient record shortages. However, Ft Detrick many times has less or equal amounts as we do in the short months or have more records but not enough to fill the holes to the 95% goal.
3. Presently we are updating the CEIS HBOC databases with data from the IDB-R. Because of issues with the way the IDB-R extracts outpatient records the possibility of duplicate records exists. For this reason we are presently not loading any outpatient IDB-R data for any Fiscal Years other than 1999. All but one of the of the outpatient data shortage months are in Fiscal Years prior to 1999, so even if we could get the missing data from Ft Detrick it will be an indefinite period of time before we are able to load it.

### **Plan**

The ICT is committed to having the most complete data possible. The following plan will be instituted to fix the holes in months where the data does not meet the 95% goal and there is presently a means to possibly retrieve the data.

1. Inpatient Shortage Fix Procedures
  - No mechanisms are presently available.
2. Outpatient Shortage Fix Procedure
  - Investigate the possibility of finding SADR files that did not load on the IDB for:
    - NH Bremerton– Jan 99
  - We will seek approval for the pulling of the outpatient records from Ft Detrick for the following facilities and months:
    - Madigan Army Medical Center – Nov 96, Mar 97, Aug 97
    - NH Bremerton – Oct 96, Nov 96, Jan 99
    - NH Oak Harbor – Oct 96, Nov 96
    - 62<sup>nd</sup> Medical Group McChord FB – Oct 98